

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Cigna Corporation Political Action Committee

ADDRESS (number and street) ▼

601 Pennsylvania Avenue NW

South Building Suite 835

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00085316

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
03 01 2016

through

M M M / D D D / Y Y Y Y Y Y
03 31 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kristin Julason Damato

Signature of Treasurer

Kristin Julason Damato

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 04 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cigna Corporation Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		242946.08
(b) Cash on Hand at Beginning of Reporting Period.....	222823.66	
(c) Total Receipts (from Line 19)	46786.25	134938.83
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	269609.91	377884.91
7. Total Disbursements (from Line 31)	75500.00	183775.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	194109.91	194109.91
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cigna Corporation Political Action Committee

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
03		01		2016

To:

M M M	/	D D D	/	Y Y Y Y Y
03		31		2016

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

29300.96

53758.75

(ii) Unitemized

17485.29

81180.08

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

46786.25

134938.83

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

46786.25

134938.83

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

46786.25

134938.83

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

46786.25

134938.83

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	1125.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1125.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	66500.00	141500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	9000.00	41150.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	75500.00	183775.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	75500.00	183775.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46786.25	134938.83
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46786.25	134938.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	1125.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	1125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anthony Abate

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Supply Chain Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-17166-20-23

Amount of Each Receipt this Period

155.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anthony Abate

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Supply Chain Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-17114-20-24

Amount of Each Receipt this Period

155.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gregory J. Allen

Mailing Address 1000 Corporate Centre Dr

City

Franklin

State

TN

Zip Code

37067-2611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-29806-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory J. Allen

Mailing Address 1000 Corporate Centre Dr

City State Zip Code
 Franklin TN 37067-2611

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-29679-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Raegan M. Armata

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-198-20-24

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ann H. Asbaty

Mailing Address 44 Whippany Rd

City State Zip Code
 Morristown NJ 07960-4558

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-293-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

140.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ann H. Asbaty

Mailing Address 44 Whippany Rd

City State Zip Code
 Morristown NJ 07960-4558

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-292-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jacquelyn A. Aube

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 VP Customer Adoption Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-1583-20-23

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jacquelyn A. Aube

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 VP Customer Adoption Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-1581-20-24

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lisa R. Bacus

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-22808-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lisa R. Bacus

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-22723-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mark Bailey

Mailing Address 1640 Dallas Pkwy

City

Plano

State

TX

Zip Code

75093-4515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-10386-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Bailey

Mailing Address 1640 Dallas Pkw

City State Zip Code
 Plano TX 75093-4515

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-10363-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amy R. Bennett

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-1453-20-23

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amy R. Bennett

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-1452-20-24

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

170.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 130

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeff Berardo

Mailing Address 44 Whippany Rd

City

Morristown

State

NJ

Zip Code

07960-4558

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	1	6

Transaction ID : 20160307-1923-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jeff Berardo

Mailing Address 44 Whippany Rd

City

Morristown

State

NJ

Zip Code

07960-4558

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	6

Transaction ID : 20160321-1920-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kim Bimestefer

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	1	6

Transaction ID : 20160307-7425-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kim Bimestefer

Mailing Address 8505 E Orchard Rd

City State Zip Code
 Greenwood Village CO 80111-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-7412-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John J. Bogan

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-21072-20-23

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. John J. Bogan

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-21002-20-24

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eva C. Borden

Mailing Address 514 W Lane Ct

City State Zip Code
Panora IA 50216-1145

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-2198-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eva C. Borden

Mailing Address 514 W Lane Ct

City State Zip Code
Panora IA 50216-1145

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-2195-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mark L. Boxer

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
EVP CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-8550-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark L. Boxer

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

EVP CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-8531-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brett C. Browchuk

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-12557-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Brett C. Browchuk

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-12523-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kelly K. Brundin

Mailing Address 610 Meadowview Ct

City State Zip Code
 Maple Glen PA 19002-2330

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 VP Financial Plng & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-2739-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kelly K. Brundin

Mailing Address 610 Meadowview Ct

City State Zip Code
 Maple Glen PA 19002-2330

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 VP Financial Plng & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-2736-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Timothy D. Buckley

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Internation

Occupation

VP Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-11676-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy D. Buckley

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Internation

Occupation

VP Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-11650-20-24

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Nancy B. Bucklin

Mailing Address 5310 E High St

City State Zip Code
Phoenix AZ 85054-5469

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-5117-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Nancy B. Bucklin

Mailing Address 5310 E High St

City State Zip Code
Phoenix AZ 85054-5469

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-5110-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Butler

Mailing Address 2223 Washington St

City

Newton

State

MA

Zip Code

02462-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-8192-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark Butler

Mailing Address 2223 Washington St

City

Newton

State

MA

Zip Code

02462-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-8176-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jill R. Canino

Mailing Address 601 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-25801-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jill R. Canino

Mailing Address 601 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-25703-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William C. Carlson

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Real Estate Sr Managing Dir

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-637-20-23

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. William C. Carlson

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Real Estate Sr Managing Dir

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-636-20-24

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

170.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert F. Clark

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Coli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-342-20-23

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Robert F. Clark

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Coli

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-341-20-24

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Timothy K. Conners

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-19288-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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PAGE 20 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy K. Conners

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-19226-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Conrad

Mailing Address 400 N Brand Blvd

City State Zip Code
Glendale CA 91203-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.51

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-1988-20-23

Amount of Each Receipt this Period

10.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Conrad

Mailing Address 400 N Brand Blvd

City State Zip Code
Glendale CA 91203-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.51

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-1985-20-24

Amount of Each Receipt this Period

9.65

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eric P. Consolazio

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-1596-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eric P. Consolazio

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-1594-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David M. Cordani

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-410-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

392.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David M. Cordani

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State
CT

Zip Code
06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-409-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Daniel J. Cozzo

Mailing Address 31792 Via Coyote

City

Coto De Caza

State

CA

Zip Code

92679-4105

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-9255-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Daniel J. Cozzo

Mailing Address 31792 Via Coyote

City

Coto De Caza

State

CA

Zip Code

92679-4105

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-9233-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rebecca A. Croes

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-30718-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Rebecca A. Croes

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-30587-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Andrew D. Crooks

Mailing Address 2701 N Rocky Point Dr

City

Tampa

State

FL

Zip Code

33607-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-7312-20-23

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Andrew D. Crooks

Mailing Address 2701 N Rocky Point Dr

City
Tampa

State
FL

Zip Code
33607-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-7299-20-24

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Balthasar A. Crosson

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-2348-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Balthasar A. Crosson

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-2345-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory J. Czar

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-8682-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gregory J. Czar

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-8663-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kristin Damato

Mailing Address 601 Pennsylvania Ave NW

City State Zip Code
Washington DC 20004-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-2164-20-23

Amount of Each Receipt this Period

120.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 130

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kristin Damato

Mailing Address 601 Pennsylvania Ave NW

City	State	Zip Code
Washington	DC	20004-2601

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-2161-20-24

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Christopher De Rosa

Mailing Address 26 Executive Park

City	State	Zip Code
Irvine	CA	92614-6739

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-1502-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Christopher De Rosa

Mailing Address 26 Executive Park

City	State	Zip Code
Irvine	CA	92614-6739

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-1501-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

320.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 130

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cyanne L. Demchak

Mailing Address 175 W Jackson Blvd

City

Chicago

State

IL

Zip Code

60604-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-15327-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cyanne L. Demchak

Mailing Address 175 W Jackson Blvd

City

Chicago

State

IL

Zip Code

60604-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-15284-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brendan J. Devine

Mailing Address 601 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-23888-20-23

Amount of Each Receipt this Period

60.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brendan J. Devine

Mailing Address 601 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-23799-20-24

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Constance J. DiManno

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-9032-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Constance J. DiManno

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-9010-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

160.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeannine Doherty

Mailing Address 5310 E High St

City

Phoenix

State

AZ

Zip Code

85054-5469

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

408.42

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-26-20-23

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jeannine Doherty

Mailing Address 5310 E High St

City

Phoenix

State

AZ

Zip Code

85054-5469

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

408.42

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-26-20-24

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marcus J. Doyle

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Strat & Bus Develop Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-12568-20-23

Amount of Each Receipt this Period

65.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marcus J. Doyle

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Strat & Bus Develop Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-12534-20-24

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen D. Drew

Mailing Address 175 W Jackson Blvd

City State Zip Code
Chicago IL 60604-2615

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-23461-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stephen D. Drew

Mailing Address 175 W Jackson Blvd

City State Zip Code
Chicago IL 60604-2615

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-23374-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

215.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 130

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael D. Elmore

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Chief Info Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-18457-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael D. Elmore

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Chief Info Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-18400-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brian Evanko

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-1603-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 130

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brian Evanko

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-1601-20-24

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scott E. Evelyn

Mailing Address 44 Whippany Rd

City

Morristown

State

NJ

Zip Code

07960-4558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-13649-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scott E. Evelyn

Mailing Address 44 Whippany Rd

City

Morristown

State

NJ

Zip Code

07960-4558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-13611-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lori Feldman

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Social Media Mktg Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-20092-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lori Feldman

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Social Media Mktg Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-20026-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scott M. Filiault

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Informatics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-219-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott M. Filiault

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Informatics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-219-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mary Fischer-McKee

Mailing Address 25600 N Norterra Dr
Bldg A

City

Phoenix

State

AZ

Zip Code

85085-8201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-11387-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mary Fischer-McKee

Mailing Address 25600 N Norterra Dr
Bldg A

City

Phoenix

State

AZ

Zip Code

85085-8201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-11362-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 130

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Susan P. Fitzpatrick

Mailing Address 140 E 45th St

City
New YorkState
NYZip Code
10017-3144FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Clinical Program Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-1500-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Susan P. Fitzpatrick

Mailing Address 140 E 45th St

City
New YorkState
NYZip Code
10017-3144FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Clinical Program Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-1499-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Patty S. Fontneau

Mailing Address 8505 E Orchard Rd

City
Greenwood VillageState
COZip Code
80111-5002FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-26608-20-23

Amount of Each Receipt this Period

80.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

180.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Patty S. Fontneau

Mailing Address 8505 E Orchard Rd

City State Zip Code
 Greenwood Village CO 80111-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-26500-20-24

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark Foulke

Mailing Address 530 Great Circle Rd

City State Zip Code
 Nashville TN 37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-30835-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mark Foulke

Mailing Address 530 Great Circle Rd

City State Zip Code
 Nashville TN 37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-30704-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 130

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Philip A. Fridl

Mailing Address 7555 Goodwin Rd

City

Chattanooga

State

TN

Zip Code

37421-3183

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-8625-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Philip A. Fridl

Mailing Address 7555 Goodwin Rd

City

Chattanooga

State

TN

Zip Code

37421-3183

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-8606-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Herbert A. Fritch

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

President Cigna HealthSpring

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-29854-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

292.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Herbert A. Fritch

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

President Cigna HealthSpring

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-29726-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Peter R. Gardner

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-30672-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Peter R. Gardner

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-30541-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Willis H. Gee

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-8274-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Willis H. Gee

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-8258-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David J. Giannoni

Mailing Address 612 Wheelers Farms Rd

City State Zip Code
 Milford CT 06461-1673

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.32

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-3510-20-23

Amount of Each Receipt this Period

6.73

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

206.73

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David J. Giannoni

Mailing Address 612 Wheelers Farms Rd

City State Zip Code
 Milford CT 06461-1673

FEC ID number of contributing federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 24 2016

Transaction ID : 20160321-3503-20-24

Amount of Each Receipt this Period

27.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jennifer R. Gilbert

Mailing Address 6401 Poplar Ave

City State Zip Code
 Memphis TN 38119-4823

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 10 2016

Transaction ID : 20160307-31466-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Jennifer R. Gilbert

Mailing Address 6401 Poplar Ave

City State Zip Code
 Memphis TN 38119-4823

FEC ID number of contributing federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 Network Opns Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 24 2016

Transaction ID : 20160321-31333-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Debra L. Glover

Mailing Address 601 Mainstream Dr

City

Nashville

State

TN

Zip Code

37228-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-29877-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Debra L. Glover

Mailing Address 601 Mainstream Dr

City

Nashville

State

TN

Zip Code

37228-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-29749-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John P. Godsill

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

SVP Information Technology

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-8299-20-23

Amount of Each Receipt this Period

160.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

260.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John P. Godsill

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State Zip Code
CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
SVP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-8283-20-24

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kristen Gorodetzer

Mailing Address 1601 Chestnut St
2

City
Philadelphia

State Zip Code
PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
HR&S Talent Optimization

Occupation
VP Total Rewards & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-10328-20-23

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kristen Gorodetzer

Mailing Address 1601 Chestnut St
2

City
Philadelphia

State Zip Code
PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
HR&S Talent Optimization

Occupation
VP Total Rewards & Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-10304-20-24

Amount of Each Receipt this Period

120.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tania K. Graves

Mailing Address 8179 Penn PI

City

Indianapolis

State

IN

Zip Code

46250-4265

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Marketing Comm Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-5474-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tania K. Graves

Mailing Address 8179 Penn PI

City

Indianapolis

State

IN

Zip Code

46250-4265

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Marketing Comm Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-5465-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Gray

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strat And Bus Develop Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-1739-20-24

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William F. Gray

Mailing Address 3 Waterside Xing

City

Windsor

State

CT

Zip Code

06095-1561

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-24686-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William F. Gray

Mailing Address 3 Waterside Xing

City

Windsor

State

CT

Zip Code

06095-1561

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-24593-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Benjy R. Green

Mailing Address 2208 Highway 121

City

Bedford

State

TX

Zip Code

76021-5981

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-29439-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Benjy R. Green

Mailing Address 2208 Highway 121

City State Zip Code
 Bedford TX 76021-5981

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-29314-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Beth C. Guest

Mailing Address 530 Great Circle Rd

City State Zip Code
 Nashville TN 37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-22552-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Beth C. Guest

Mailing Address 530 Great Circle Rd

City State Zip Code
 Nashville TN 37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-22471-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David D. Guilmette

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-16974-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David D. Guilmette

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-16922-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. James E. Gulley

Mailing Address 601 Mainstream Dr

City

Nashville

State

TN

Zip Code

37228-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-30482-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. James E. Gulley

Mailing Address 601 Mainstream Dr

City

Nashville

State

TN

Zip Code

37228-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-30352-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Theresa A. Hall

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-14220-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Theresa A. Hall

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-14181-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Julian J. Harris

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Strategic Operations Plng

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

459.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-33015-20-23

Amount of Each Receipt this Period

153.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Julian J. Harris

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Strategic Operations Plng

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

459.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-32875-20-24

Amount of Each Receipt this Period

153.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gregory T. Hicks

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Human Resources

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

515.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-10136-20-23

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

386.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gregory T. Hicks

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Human Resources

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

515.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-10112-20-24

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Christopher J. Hocevar

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

690.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-8255-20-23

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Christopher J. Hocevar

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

690.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-8239-20-24

Amount of Each Receipt this Period

115.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

345.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carole Hodsdon

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-2733-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Carole Hodsdon

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-2730-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David Holladay

Mailing Address 500 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-24456-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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PAGE 51 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Horlacher

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-2630-20-23

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Horlacher

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-2627-20-24

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Julia M. Huggins

Mailing Address 111 S Calvert St

City State Zip Code
Baltimore MD 21202-6174

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-451-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Julia M. Huggins

Mailing Address 111 S Calvert St

City
Baltimore

State
MD

Zip Code
21202-6174

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-450-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jay L. Hurt

Mailing Address 2900 North Loop W

City
Houston

State
TX

Zip Code
77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-31113-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Jay L. Hurt

Mailing Address 2900 North Loop W

City
Houston

State
TX

Zip Code
77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-30981-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

300.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 130

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tamara A. Igunbor

Mailing Address W144N7150 Terrace Dr

City	State	Zip Code
Menomonee Falls	WI	53051-0930

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-24825-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tamara A. Igunbor

Mailing Address W144N7150 Terrace Dr

City	State	Zip Code
Menomonee Falls	WI	53051-0930

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-24730-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Crystal Jack

Mailing Address 1171 Arroyo Grande Dr

City	State	Zip Code
Sacramento	CA	95864-2843

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-24717-20-23

Amount of Each Receipt this Period

116.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

216.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Crystal Jack

Mailing Address 1171 Arroyo Grande Dr

City State Zip Code
 Sacramento CA 95864-2843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-24624-20-24

Amount of Each Receipt this Period

116.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John M. Jacobs

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-2502-20-24

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Clifton S. Jacobson

Mailing Address 7034 Lakewood Blvd

City State Zip Code
 Dallas TX 75214-3558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-31057-20-23

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

343.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Clifton S. Jacobson

Mailing Address 7034 Lakewood Blvd

City
Dallas

State
TX

Zip Code
75214-3558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-30925-20-24

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. James M. Jeffers

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State
CT

Zip Code
06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-257-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Nicole S. Jones

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State
CT

Zip Code
06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP and General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-11538-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Nicole S. Jones

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP and General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-11513-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Teresa R. Jordan

Mailing Address 2900 North Loop W

City State Zip Code
 Houston TX 77092-8841

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-29857-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Teresa R. Jordan

Mailing Address 2900 North Loop W

City State Zip Code
 Houston TX 77092-8841

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-29729-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott Josephs

Mailing Address 701 Corporate Center Dr

City Raleigh State NC Zip Code 27607-5084

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
VP Total Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-6138-20-23

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scott Josephs

Mailing Address 701 Corporate Center Dr

City Raleigh State NC Zip Code 27607-5084

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
VP Total Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-6128-20-24

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Joan Kennedy

Mailing Address 65 S River Rd

City Stuart State FL Zip Code 34996-6400

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
VP Consumer Health Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-21074-20-23

Amount of Each Receipt this Period

160.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joan Kennedy

Mailing Address 65 S River Rd

City
StuartState
FLZip Code
34996-6400FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Consumer Health Engagement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-21004-20-24

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Edward S. Kim

Mailing Address 25500 N Norterra Dr
Bldg BCity
PhoenixState
AZZip Code
85085-8200FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-19013-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Edward S. Kim

Mailing Address 25500 N Norterra Dr
Bldg BCity
PhoenixState
AZZip Code
85085-8200FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-18953-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

260.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gary E. Kirkner

Mailing Address 89 Surfsong Rd

City State Zip Code
 Kiawah Island SC 29455-5756

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-8352-20-23

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gary E. Kirkner

Mailing Address 89 Surfsong Rd

City State Zip Code
 Kiawah Island SC 29455-5756

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-8336-20-24

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kristinn K. Klunkert

Mailing Address 2900 North Loop W

City State Zip Code
 Houston TX 77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-31127-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kristinn K. Klunkert

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-30995-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. James Kucharczyk

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-18867-20-23

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. James Kucharczyk

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-18808-20-24

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

260.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kenneth P. Langevin

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-1217-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kenneth P. Langevin

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-1216-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. R. Lara

Mailing Address 25600 N Norterra Dr
Bldg A

City

Phoenix

State

AZ

Zip Code

85085-8201

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-2448-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. R. Lara

Mailing Address 25600 N Norterra Dr
Bldg A

City State Zip Code
Phoenix AZ 85085-8201

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 24 2016

Transaction ID : 20160321-2445-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amy C. Lazzaro

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 10 2016

Transaction ID : 20160307-20882-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Amy C. Lazzaro

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 24 2016

Transaction ID : 20160321-20812-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thulani M. Legrier

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-27844-20-23

Amount of Each Receipt this Period

48.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Thulani M. Legrier

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-27730-20-24

Amount of Each Receipt this Period

48.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Christopher J. Lockery

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-9242-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

146.16

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher J. Lockery

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Sr Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-9220-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jane E. Loftus

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Human Resources Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-13061-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jane E. Loftus

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Human Resources Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-13026-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott A. Macchi

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-738-20-23

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scott A. Macchi

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-737-20-24

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kenneth Malley

Mailing Address 764 W Saddle River Rd

City State Zip Code
 Ho Ho Kus NJ 07423-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
 Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-25497-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kenneth Malley

Mailing Address 764 W Saddle River Rd

City

Ho Ho Kus

State

NJ

Zip Code

07423-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-25400-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. A. Maltby

Mailing Address 300 Bellevue Pkwy
Ste 101

City

Wilmington

State

DE

Zip Code

19809-3704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-17892-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. A. Maltby

Mailing Address 300 Bellevue Pkwy
Ste 101

City

Wilmington

State

DE

Zip Code

19809-3704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-17838-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Matthew G. Manders

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Pres US Mkts & Global HC Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-1864-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Matthew G. Manders

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Pres US Mkts & Global HC Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-1862-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brian J. Marquis

Mailing Address 500 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Segment Marketing Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

03 / 31 / 2016

Transaction ID : C54F16839B8F47949401

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2384.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark P. Marsters

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
VP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-9078-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark P. Marsters

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
VP Service Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-9056-20-24

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thomas J. Martel

Mailing Address 2223 Washington St

City Newton State MA Zip Code 02462-1417

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
RVP Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-8809-20-23

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas J. Martel

Mailing Address 2223 Washington St

City

Newton

State

MA

Zip Code

02462-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

RVP Segment Lead

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-8791-20-24

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Louise M. McCagg

Mailing Address 3601 Odonnell St

City

Baltimore

State

MD

Zip Code

21224-5238

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-29793-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Louise M. McCagg

Mailing Address 3601 Odonnell St

City

Baltimore

State

MD

Zip Code

21224-5238

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-29666-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Julie A. McCarter

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-14529-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Julie A. McCarter

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-14488-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thomas A. McCarthy

Mailing Address 1601 Chestnut St
 # 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-8391-20-23

Amount of Each Receipt this Period

185.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas A. McCarthy

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-8373-20-24

Amount of Each Receipt this Period

185.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sheila McGinley-Graziosi

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-1273-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Sheila McGinley-Graziosi

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-1272-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven Mintz

Mailing Address 130 Enclave Cir

City State Zip Code
 Atlanta GA 30342-2078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-17608-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Steven Mintz

Mailing Address 130 Enclave Cir

City State Zip Code
 Atlanta GA 30342-2078

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-17555-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Laura Minzer

Mailing Address 2570 Tozer Rd

City State Zip Code
 Springfield IL 62707-2651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-24303-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Laura Minzer

Mailing Address 2570 Tozer Rd

City State Zip Code
 Springfield IL 62707-2651

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Cigna Corp. Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-24213-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Morris D. Mirabella

Mailing Address 2701 N Rocky Point Dr

City State Zip Code
 Tampa FL 33607-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-5919-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Morris D. Mirabella

Mailing Address 2701 N Rocky Point Dr

City State Zip Code
 Tampa FL 33607-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 CT GENERAL LIFE INSURANCE CO General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-5909-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Frank A. Monahan

Mailing Address 7400 W 110th St

City State Zip Code
 Overland Park KS 66210-2358

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-10020-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Frank A. Monahan

Mailing Address 7400 W 110th St

City State Zip Code
 Overland Park KS 66210-2358

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-9996-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Melanie N. Monchick

Mailing Address 701 Corporate Center Dr

City State Zip Code
 Raleigh NC 27607-5084

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INT'L REHAB. ASSOCIATES, INC.

Occupation
 Clinical Program Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-5674-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Melanie N. Monchick

Mailing Address 701 Corporate Center Dr

City

Raleigh

State

NC

Zip Code

27607-5084

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Clinical Program Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-5665-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael W. Moran

Mailing Address 525 W Monroe St

City

Chicago

State

IL

Zip Code

60661-3629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-16477-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael W. Moran

Mailing Address 525 W Monroe St

City

Chicago

State

IL

Zip Code

60661-3629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-16428-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eric C. Motter

Mailing Address 1401 Spanish Trail Ct

City State Zip Code
Blacklick OH 43004-9803

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Market Insight Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-7416-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eric C. Motter

Mailing Address 1401 Spanish Trail Ct

City State Zip Code
Blacklick OH 43004-9803

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Market Insight Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-7403-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Alan M. Muney

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation
VP Total Med/Chief Med Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-17039-20-23

Amount of Each Receipt this Period

175.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alan M. Muney

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Total Med/Chief Med Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-16987-20-24

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John M. Murabito

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Human Resources & Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-9336-20-23

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John M. Murabito

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Human Resources & Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-9314-20-24

Amount of Each Receipt this Period

154.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

483.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Noreen Nageotte

Mailing Address 28205 W Oviatt Rd

City State Zip Code
Bay Village OH 44140-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-6353-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Noreen Nageotte

Mailing Address 28205 W Oviatt Rd

City State Zip Code
Bay Village OH 44140-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-6343-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Laurinda M. Newell

Mailing Address 400 N Brand Blvd

City State Zip Code
Glendale CA 91203-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-9172-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Laurinda M. Newell

Mailing Address 400 N Brand Blvd

City

Glendale

State

CA

Zip Code

91203-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-9150-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael T. Nole

Mailing Address 1571 Sawgrass Corporate Pkwy

City

Sunrise

State

FL

Zip Code

33323-2862

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-16175-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael T. Nole

Mailing Address 1571 Sawgrass Corporate Pkwy

City

Sunrise

State

FL

Zip Code

33323-2862

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-16130-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard S. Novack

Mailing Address 3500 Piedmont Rd NE

City

Atlanta

State

GA

Zip Code

30305-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-16027-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard S. Novack

Mailing Address 3500 Piedmont Rd NE

City

Atlanta

State

GA

Zip Code

30305-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-15982-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eliana M. Nunez

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operating Effectiveness Sr Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-1083-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eliana M. Nunez

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 Operating Effectiveness Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-1082-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Oates

Mailing Address 1701 Patterson Rd

City State Zip Code
 Austin TX 78733-6500

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-11478-20-23

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. John Oates

Mailing Address 1701 Patterson Rd

City State Zip Code
 Austin TX 78733-6500

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corp.

Occupation
 VP Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-11453-20-24

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lester Keith Osborne

Mailing Address 13759 E Paradise Dr

City

Scottsdale

State

AZ

Zip Code

85259-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-5971-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lester Keith Osborne

Mailing Address 13759 E Paradise Dr

City

Scottsdale

State

AZ

Zip Code

85259-3709

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-5961-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michele Paige

Mailing Address 12 Millbrook Ct

City

Livingston

State

NJ

Zip Code

07039-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-22322-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michele Paige

Mailing Address 12 Millbrook Ct

City
Livingston

State
NJ

Zip Code
07039-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-22242-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Eric P. Palmer

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State
CT

Zip Code
06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Bus Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-5162-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eric P. Palmer

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State
CT

Zip Code
06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Bus Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-5155-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffery P. Panter

Mailing Address 7555 Goodwin Rd

City

Chattanooga

State

TN

Zip Code

37421-3183

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-4248-20-24

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark A. Parsons

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

SVP Reinsurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-399-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mark A. Parsons

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

SVP Reinsurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-398-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Allen C. Perez

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Developmt Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-31109-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Allen C. Perez

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Developmt Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-30977-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David C. Peterson

Mailing Address 913 Woodhill Cir

City

Watertown

State

MN

Zip Code

55388-9267

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-5065-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David C. Peterson

Mailing Address 913 Woodhill Cir

City

Watertown

State

MN

Zip Code

55388-9267

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-5058-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Heather R. Peterson

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-29945-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Heather R. Peterson

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-29817-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Danthu T. Phan

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-10107-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Danthu T. Phan

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-10083-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thomas M. Philibotte

Mailing Address 7555 Goodwin Rd

City Chattanooga State TN Zip Code 37421-3183

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-15-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas M. Philibotte

Mailing Address 7555 Goodwin Rd

City

Chattanooga

State

TN

Zip Code

37421-3183

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-15-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael J. Phillips

Mailing Address 525 W Monroe St

City

Chicago

State

IL

Zip Code

60661-3629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-24565-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michael J. Phillips

Mailing Address 525 W Monroe St

City

Chicago

State

IL

Zip Code

60661-3629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-24472-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ena Pierce

Mailing Address 5206 Downing Rd

City State Zip Code
 Baltimore MD 21212-4114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-29774-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ena Pierce

Mailing Address 5206 Downing Rd

City State Zip Code
 Baltimore MD 21212-4114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-29647-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jeremiah Pierson

Mailing Address 317 Spy Glass Hill Rd

City State Zip Code
 Bath PA 18014-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-21310-20-24

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jonathan M. Prokup

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-20773-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jonathan M. Prokup

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-20704-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Philip Rabinowitz

Mailing Address 3000 Park Lane Dr

City State Zip Code
Pittsburgh PA 15275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-10820-20-24

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Edward J. Rado

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-15759-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Edward J. Rado

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-15714-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Eugene J. Rapisardi

Mailing Address 400 N Brand Blvd

City

Glendale

State

CA

Zip Code

91203-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-13709-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Eugene J. Rapisardi

Mailing Address 400 N Brand Blvd

City

Glendale

State

CA

Zip Code

91203-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-13671-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jennifer E. Rapp

Mailing Address 43883 Carentan Dr

City

Temecula

State

CA

Zip Code

92592-3949

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-9821-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jennifer E. Rapp

Mailing Address 43883 Carentan Dr

City

Temecula

State

CA

Zip Code

92592-3949

FEC ID number of contributing
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-9797-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Andrew W. Reeves

Mailing Address 3500 Piedmont Rd NE

City State Zip Code
 Atlanta GA 30305-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-12854-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Andrew W. Reeves

Mailing Address 3500 Piedmont Rd NE

City State Zip Code
 Atlanta GA 30305-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-12820-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Jeffrey T. Rigg

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-18700-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey T. Rigg

Mailing Address 1601 Chestnut St
2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-18642-20-24

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Catherine M. Riley

Mailing Address 4000 Faber Place Dr

City Charleston State SC Zip Code 29405-8585

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-1834-20-23

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Catherine M. Riley

Mailing Address 4000 Faber Place Dr

City Charleston State SC Zip Code 29405-8585

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-1832-20-24

Amount of Each Receipt this Period

55.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kevin L. Ritchie

Mailing Address 140 E 45th St

City
New YorkState
NYZip Code
10017-3144FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-744-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kevin L. Ritchie

Mailing Address 140 E 45th St

City
New YorkState
NYZip Code
10017-3144FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Manager Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-743-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John F. Roche

Mailing Address 900 Cottage Grove Rd

City
BloomfieldState
CTZip Code
06002-2920FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-23616-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John F. Roche

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-23529-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ruth T. Rose

Mailing Address 3408 Nottingham Rd

City

Westminster

State

MD

Zip Code

21157-8304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-23609-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ruth T. Rose

Mailing Address 3408 Nottingham Rd

City

Westminster

State

MD

Zip Code

21157-8304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-23522-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Rottkamp

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Enterprise Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-1671-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Rottkamp

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Enterprise Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-1669-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cynthia Ryan

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Talent Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-1481-20-23

Amount of Each Receipt this Period

77.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

277.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cynthia Ryan

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 VP Talent Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-1480-20-24

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. James J. Saad

Mailing Address 1640 Dallas Pkwy

City State Zip Code
 Plano TX 75093-4515

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corporation

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-11101-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. James J. Saad

Mailing Address 1640 Dallas Pkwy

City State Zip Code
 Plano TX 75093-4515

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cigna Corporation

Occupation
 Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-11077-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

177.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard B. Salmon

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-1705-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard B. Salmon

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-1703-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Jon L. Sandberg

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-20672-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jon L. Sandberg

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-20605-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Paul A. Sanford

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Operating Effectiveness

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-7199-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Paul A. Sanford

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Operating Effectiveness

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1152.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-7186-20-24

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

459.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Frank Sataline

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 SVP Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-400-20-23

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Frank Sataline

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CT GENERAL LIFE INSURANCE CO

Occupation
 SVP Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-399-20-24

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. David S. Scheibe

Mailing Address 1601 Chestnut St
 # 2

City State Zip Code
 Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE INS. CO. OF NORTH AMERICA

Occupation
 Treasury Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-1239-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

290.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. David S. Scheibe

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Treasury Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-1238-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kenneth R. Silvay

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-911-20-23

Amount of Each Receipt this Period

62.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kenneth R. Silvay

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Accounting Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-910-20-24

Amount of Each Receipt this Period

62.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William J. Smith

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Business Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-6356-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William J. Smith

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
LIFE INS. CO. OF NORTH AMERICA

Occupation
Business Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-6346-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Raymond Smithberger

Mailing Address 900 Cottage Grove Rd

City State Zip Code
Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-9278-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Raymond Smithberger

Mailing Address 900 Cottage Grove Rd

City
Bloomfield

State Zip Code
CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-9256-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bill Sprague

Mailing Address 1601 Chestnut St
2

City
Philadelphia

State Zip Code
PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-2012-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bill Sprague

Mailing Address 1601 Chestnut St
2

City
Philadelphia

State Zip Code
PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna Corp.

Occupation
IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-20146-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Craig J. Steel

Mailing Address 122 Demarest Ave

City State Zip Code
 Emerson NJ 07630-1747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-24790-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Craig J. Steel

Mailing Address 122 Demarest Ave

City State Zip Code
 Emerson NJ 07630-1747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-24697-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jan C. Sykes

Mailing Address 25500 N Norterra Dr
 Bldg B

City State Zip Code
 Phoenix AZ 85085-8200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna HEALTHCARE OF AZ, INC

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-7494-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jan C. Sykes

Mailing Address 25500 N Norterra Dr
Bldg B

City State Zip Code
Phoenix AZ 85085-8200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cigna HEALTHCARE OF AZ, INC

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-7481-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amy J. Szable

Mailing Address 38901 Detroit Rd

City State Zip Code
Avon OH 44011-2160

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Business Comm Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-3390-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Amy J. Szable

Mailing Address 38901 Detroit Rd

City State Zip Code
Avon OH 44011-2160

FEC ID number of contributing
federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Business Comm Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-3383-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Neil B. Tanner

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-16861-20-23

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Neil B. Tanner

Mailing Address 1601 Chestnut St
2

City State Zip Code
Philadelphia PA 19192-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-16809-20-24

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Terry W. Terrill

Mailing Address 530 Great Circle Rd

City State Zip Code
Nashville TN 37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Human Resources Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-29881-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Terry W. Terrill

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Human Resources Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-29753-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jeffrey E. Tindall

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-9996-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jeffrey E. Tindall

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-9972-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael W. Triplett

Mailing Address 901 E Cary St

City

Richmond

State

VA

Zip Code

23219-4063

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Regional Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-631-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael W. Triplett

Mailing Address 901 E Cary St

City

Richmond

State

VA

Zip Code

23219-4063

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Regional Segment Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-630-20-24

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Michelle Vancura

Mailing Address 35507 N Via Tramonto

City

Phoenix

State

AZ

Zip Code

85086-5516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-23792-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michelle Vancura

Mailing Address 35507 N Via Tramonto

City State Zip Code
 Phoenix AZ 85086-5516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-23704-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Julie A. Vayer

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna BEHAVIORAL HEALTH, INC.

Occupation

VP Total Health & Network Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-7139-20-23

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Julie A. Vayer

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna BEHAVIORAL HEALTH, INC.

Occupation

VP Total Health & Network Oper

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-7126-20-24

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jennifer L. Velasquez

Mailing Address 11401 SW 40th St

City
Miami

State
FL

Zip Code
33165-3372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-31215-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jennifer L. Velasquez

Mailing Address 11401 SW 40th St

City
Miami

State
FL

Zip Code
33165-3372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-31082-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Philip J. Wasden

Mailing Address 300 Big Bend Trl

City
Sugar Hill

State
GA

Zip Code
30518-5691

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF GA, INC.

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-4592-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Philip J. Wasden

Mailing Address 300 Big Bend Trl

City

Sugar Hill

State

GA

Zip Code

30518-5691

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF GA, INC.

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-4585-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William M. Welch

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 10 / 2016

Transaction ID : 20160307-20682-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. William M. Welch

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 24 / 2016

Transaction ID : 20160321-20615-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Reginald White

Mailing Address 3500 Piedmont Rd NE

City	State	Zip Code
Atlanta	GA	30305-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-10275-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Reginald White

Mailing Address 3500 Piedmont Rd NE

City	State	Zip Code
Atlanta	GA	30305-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-10251-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Diane M. Wilkosz

Mailing Address 2701 N Rocky Point Dr

City	State	Zip Code
Tampa	FL	33607-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF FL, INC

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-1751-20-23

Amount of Each Receipt this Period

74.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

174.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diane M. Wilkosz

Mailing Address 2701 N Rocky Point Dr

City
Tampa

State
FL

Zip Code
33607-5917

FEC ID number of contributing
federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF FL, INC

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-1749-20-24

Amount of Each Receipt this Period

74.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jenny R. Wilson

Mailing Address 401 Chestnut St

City

Chattanooga

State

TN

Zip Code

37402-4924

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Underwriting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-3224-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jenny R. Wilson

Mailing Address 401 Chestnut St

City

Chattanooga

State

TN

Zip Code

37402-4924

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Underwriting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-3218-20-24

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 130

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Daniel Wiss

Mailing Address 231 S Bemiston Ave

City
ClaytonState
MOZip Code
63105-1914FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-8260-20-24

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bradley A. WolframMailing Address 11200 Lakeline Blvd
Ste 100City
AustinState
TXZip Code
78717-5964FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2016

Transaction ID : 20160307-31910-20-23

Amount of Each Receipt this Period

86.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bradley A. WolframMailing Address 11200 Lakeline Blvd
Ste 100City
AustinState
TXZip Code
78717-5964FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2016

Transaction ID : 20160321-31774-20-24

Amount of Each Receipt this Period

86.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

212.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 116 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. John M. Wray

Mailing Address 140 E 45th St

City

New York

State

NY

Zip Code

10017-3144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Network Delivery Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-21426-20-23

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John M. Wray

Mailing Address 140 E 45th St

City

New York

State

NY

Zip Code

10017-3144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Network Delivery Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-21351-20-24

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bu Yang

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-6893-20-23

Amount of Each Receipt this Period

55.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

405.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 117 OF 130

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bu Yang

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-6882-20-24

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David G. Zach

Mailing Address 9 Heritage Ln

City

Phoenixville

State

PA

Zip Code

19460-4607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : 20160307-23311-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. David G. Zach

Mailing Address 9 Heritage Ln

City

Phoenixville

State

PA

Zip Code

19460-4607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2016

Transaction ID : 20160321-23225-20-24

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

255.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 OF 130

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. George Zaruba

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 10 / 2016

Transaction ID : 20160307-21898-20-23

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. George Zaruba

Mailing Address 900 Cottage Grove Rd

City State Zip Code
 Bloomfield CT 06002-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 24 / 2016

Transaction ID : 20160321-21819-20-24

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

308.00

TOTAL This Period (last page this line number only)..... ►

29300.96

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. AMERIPAC: The Fund for a Greater AmericaMailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2016 Contribution

Candidate Name

AMERIPAC: The Fund for a Greater AmericaOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☐ General
☒ Other (specify) ☐ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : BC8CD55BA28F7A851CE

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ami Bera for Congress

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement
2016 Primary

Candidate Name

Amerish B. BeraOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ☐ Contribution

State: CA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : DD818266E34C121C15F

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Billy Long for Congress

Mailing Address 3246 E Ridgeview St

City Springfield State MO Zip Code 65804-4076

Purpose of Disbursement
2016 Primary

Candidate Name

William H. Long IIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ☐ Contribution

State: MO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : 437C9ADB424F99EA7CB

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Blumenthal for ConnecticutMailing Address 777 Summer Street Ste 103
C/O Cacace Tusch & Santagata

City Stamford State CT Zip Code 06901

Purpose of Disbursement
2016 General

Candidate Name

Richard BlumenthalOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : EF89B2BB700A420B176

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bob Casey for Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
2018 Primary

Candidate Name

Robert P. Casey JrOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2016

Transaction ID : D2542A9F6FDF51826DC

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for BoyleMailing Address 499 S. Capitol St. SW
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
2016 Primary

Candidate Name

Brendan Francis BoyleOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : E040F7A6D28CAA926B

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for Prosperity in America Today PAC

Mailing Address 228 S Washington St Ste 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
2016 Contribution

011

Candidate Name

Citizens for Prosperity in America Today PACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : CDCFC11DA1D50C791D6

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Coffman for Congress 2016

Mailing Address 4950 S Yosemite Street F2 #511

City	State	Zip Code
Greenwood Village	CO	80111

Purpose of Disbursement
2016 General

011

Candidate Name

Michael H. CoffmanCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CO District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : 11EAE58FD3ED5E98B52

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cooper for CongressMailing Address C/O Dglf Cpas & Business Advisors
PO Box 198087

City	State	Zip Code
Nashville	TN	37219

Purpose of Disbursement
2016 Primary

011

Candidate Name

James Hayes CooperCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TN District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : F80D43F9E26C863E766

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diane Black for Congress

Mailing Address PO Box 1437

City Gallatin	State TN	Zip Code 37066-1437
------------------	-------------	------------------------

Purpose of Disbursement
2016 Primary

011

Candidate Name

Diane Lynn BlackOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : D3BC5A0198EF143A726

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dold for Congress

Mailing Address PO Box 6312

City Libertyville	State IL	Zip Code 60048
----------------------	-------------	-------------------

Purpose of Disbursement
2016 General

011

Candidate Name

Robert James Dold Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : 909B2DA872951CF2F47

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dold for Congress

Mailing Address PO Box 6312

City Libertyville	State IL	Zip Code 60048
----------------------	-------------	-------------------

Purpose of Disbursement
2016 General

011

Candidate Name

Robert James Dold Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : B323A3E5EE5F4E69609

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Doyle for Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address 205 Hawthorne Ct

City	State	Zip Code
Pittsburgh	PA	15221-4400

Purpose of Disbursement
2016 Primary

011

Transaction ID : 0A26C944CBC4B395D96

Amount of Each Disbursement this Period

2000.00

Candidate Name

Michael F. DoyleCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 14

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Chris Murphy

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Mailing Address PO Box 127

City	State	Zip Code
Cheshire	CT	06410

Purpose of Disbursement
2018 Convention

011

Transaction ID : 26BDA0404E91BE209DF

Amount of Each Disbursement this Period

2000.00

Candidate Name

Christopher Scott MurphyCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☐ General
☒ Other (specify) ▼

State: CT District:

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Elizabeth Esty

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Mailing Address PO Box 61

City	State	Zip Code
Cheshire	CT	06410

Purpose of Disbursement
2016 Convention

011

Transaction ID : AB5DC3E0B165488CAD0

Amount of Each Disbursement this Period

1500.00

Candidate Name

Elizabeth H. EstyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☐ General
☒ Other (specify) ▼

State: CT District: 05

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Georgians for Isakson

Mailing Address Post Office Box 250116

City Atlanta	State GA	Zip Code 30325
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Purpose of Disbursement
2016 Primary

Candidate Name

Johnny H. IsaksonOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : F9990E20E2EFDEF15DF

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kirk for Senate

Mailing Address PO Box 2594

City Chicago	State IL	Zip Code 60690
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Purpose of Disbursement
2016 General

Candidate Name

Mark Steven KirkOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : 1B258CDE4412F337735

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kuster for Congress, Inc

Mailing Address PO Box 1498

City Concord	State NH	Zip Code 03302
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Purpose of Disbursement
2016 Primary

Candidate Name

Ann McLane KusterOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : DE62B0D4FFD259C666D

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 125 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kyrsten Sinema for Congress

Mailing Address PO Box 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement
2016 Primary

011

Candidate Name

Kyrsten SinemaCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : F65E6D4D9A25A24E535

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mark Pocan for Congress

Mailing Address PO Box 327

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement
2016 Primary

011

Candidate Name

Mark PocanCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : 66660AED12248BAE1D1

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Thompson for Congress

Mailing Address 5429 Madison Avenue

City	State	Zip Code
Sacramento	CA	95841

Purpose of Disbursement
2016 Primary

011

Candidate Name

Michael C. ThompsonCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : A586C941AFADA1B9AC8

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 First Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
2016 Contribution

011

Candidate Name

NRCC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : 43A88326B357808A852

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Mailing Address 601 Pennsylvania Avenue NW Ste 740

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
2016 Contribution

011

Candidate Name

Pharmaceutical Care Management Association Political Action Committee (PCMA PAC)

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : B3D5A307C2B283EFA04

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Prosperity Action Inc.

Mailing Address 320 1st Street SE

City
WashingtonState
DCZip Code
22314-2000Purpose of Disbursement
2016 Contribution

011

Candidate Name

Prosperity Action Inc.

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : 368789844D866327DBE

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 127 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Terri Sewell for Congress

Mailing Address PO Box 1964

City	State	Zip Code
Birmingham	AL	35201

Purpose of Disbursement
2016 General

Candidate Name

Terri Andrea Sewell

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: AL	District: 07

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2016

Transaction ID : 39E04D460E025C7D879

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

66500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 128 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens for BivinsMailing Address PO Box 3422
c/o RSSCC

City Springfield State IL Zip Code 62708

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : A4E7C3C1A5DEE9174D7

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Leslie Munger

Mailing Address 55 W Monroe, Suite 940

City Chicago State IL Zip Code 60603

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : AF6022C8F79C235CBD3

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Lisa Madigan

Mailing Address 500 N. Dearborn St - Suite 510

City Chicago State IL Zip Code 60654

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : B64A0571081E94C8118

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dave Syverson Campaign Committee

Mailing Address 555 S Perryville Rd

City	State	Zip Code
Rockford	IL	61108

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : E664C01D684DF0EC6C0

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends for Susana Mendoza

Mailing Address 4044 N. Lincoln Ave - #520

City	State	Zip Code
Chicago	IL	60618

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : 5B584742BAE9BE87D46

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Chapin Rose

Mailing Address Post Office Box 435

City	State	Zip Code
Charleston	IL	61920-0435

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2016

Transaction ID : 421B6B543AA8C9FF286

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 130 OF 130

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Senator Don White

Mailing Address PO Box 363

City	State	Zip Code
Indiana	PA	15701

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : 39CA29252DF16AE845A

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Tina Pickett

Mailing Address PO Box 203

City	State	Zip Code
Wysox	PA	18854

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : 44F16D8B6D240DED17E

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Republican State Senate Campaign Committee (RSSCC)

Mailing Address PO Box 3422

City	State	Zip Code
Springfield	IL	62708

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

Transaction ID : 06DC2EBA28CE86CE19D

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

9000.00
